

Important Milestones in DoD Provision of ABA to Military Children (1997-2021)



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"I thought these recent changes presented an opportunity to look back at the history of the last twenty + years of similar episodes. Unfortunately, these changes aren't the first time these same military parents and providers have had to fight tooth and nail to engage senior leaders to make change...it's been going on for a generation." Jeremy Hilton

1997

DoD Program for Persons with Disabilities (PFPWD) initiated, replacing the DoD Program for the Handicapped (originally created in 1967). \$1000/month limit on services. PFPWD and subsequent iterations of the program (Extended Care Health Option, ECHO) are only for dependents of active-duty personnel.

2000
Aug. 17

Under contract with DoD, ECRI issues report "[Comprehensive Programs for the Treatment of Children with Autism](#)"

2001

Applied Behavioral Analysis (ABA) therapy added as a benefit under PFPWD. Model follows industry practice of utilizing "tutors" or aids under supervision of BCBA-certified provider. DoD's position is ABA is a special education intervention, not medically necessary care.

2005
Sept. 1

Extended Care Health Option (ECHO) created in 2002 NDAA put into policy. DHA specifies only certified ABA providers can provide services. \$2500/month limit on [TRICARE Policy Manual, 6010.54-M, Chapter 9, Section 17.1](#) effective 1 Sept 2005. Given the nationwide shortage of providers, this significantly limits those who can receive services.

2006
Oct. 17

Military parents advocated for [SEC. 717 of 2007 NDAA](#), requiring Secretary of Defense to develop a plan to provide services to military dependent children with autism". In preparing the report, DoD hosts several sensing sessions with an expert panel and a parent panel.

2007
Jul. 11

[Sec 717 Report](#) to Congress submitted to Congress.

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TRICARE Management Activity (TMA) issues [Letter to Healthnet](#) stating that ECHO is to cover ABA for children without an autism diagnosis (like Downs syndrome or CP), stating,

“1. Neither the TRICARE Policy Manual (TPM) nor 32 CFR 199.5 requires a diagnosis of Autism to qualify for ABA. In fact, both references are intentionally silent in this regard to allow contractors to make appropriate coverage determinations based on the specifics of each case.

2. Per 32 CFR 199.5, apart from establishing a “qualifying condition” for registration in ECHO, the diagnosis does not necessarily determine the benefits available under ECHO. That is, the ECHO benefits are designed to confirm, arrest, or reduce the severity of the disabling effects of the qualifying condition. In the specific case of ABA, it is a benefit under ECHO in those cases where it is capable of confirming, arresting, or reducing the severity of the disabling effects of a qualifying condition.”

2007
Sept. 24

2007
Dec. 10

Army Vice Chief of Staff, Gen Cody, endorses inclusion of ABA as a basic TRICARE benefit in Letter to Assistant Secretary of Health Affairs

2008
Jan

- **17 Jan 2008:** Navy Surgeon General, Adm Robinson, endorses inclusion of ABA as a basic TRICARE benefit in [Letter to Assistant Secretary of Health Affairs](#)
- **28 Jan 2008:** NDAA signed into law, implementing [Sec 587, Education and Treatment for Military Dependent Children with Autism](#)

2008
Mar. 13

In response to the Sec 717 Report to Congress, the [DoD Enhanced Access to Autism Services Demonstration](#) starts. Expanded providers to include “tutors”, with significant changes on [15 May 2008](#), and [7 Nov 2008](#). ECHO ABA continues as before, with only BCBA providers providing services.

2008
Oct. 14

Military parents advocate for [Sec 732](#) of 2009 NDAA, eliminating \$2,500/month ECHO requirement and replaces with a \$36,000/year cap.

2008
Nov. 25

Under contract with DoD, ECRI issues report [“Comprehensive Educational and Behavioral Interventions for the Treatment of Autism Spectrum Disorders.”](#)

2009
Jan. 12

Under contract with DoD, ECRI issues report [“Focal Educational and Behavioral Interventions for the Treatment of Autism Spectrum Disorders.”](#)

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In a [Florida Medicaid case](#), a federal judge finds ABA is medically necessary to treat children with autism, creating a permanent injunction against the state of Florida. Of note was the technology assessment of ABA by Hayes Inc in this Florida Medicaid case was the same one used by DoD. Hayes is a for-profit health technology assessment company.

2012
Mar. 26

[OPM](#) announces it will make ABA coverage available as part of its basic medical benefit for federal employees, holding,

2012
Apr. 19

"The OPM Benefit Review Panel recently evaluated the status of Applied Behavior Analysis (ABA) for children with autism. Previously, ABA was considered to be an educational intervention and not covered under the FEHB Program. The Panel concluded that there is now sufficient evidence to categorize ABA as medical therapy."

[Senate Armed Services Subcommittee on Personnel](#) hosts hearing on military families with special needs. The hearing itself is largely a conversation about ABA. From Senator Gillibrand's office,

2012
Jun. 21

"As follow up to the hearing, the Senator delivered to DOD a compilation of recent research that Autism Speaks compiled. The Senator requested DOD to review the research as expeditiously as possible in order to reassess whether ABA services would be covered by Tricare. We will use our oversight authority to maintain vigilance over this issue."

Federal judge in Berge case [finds](#),

"In light of the facts before it and the state of the law—the views of the medical community concerning the effectiveness of ABA therapy, Congress' express purpose for enacting the military health benefits statute, the Supreme Court's and the District of Columbia Circuit's jurisprudence requiring that statutes conferring benefits to Armed Service members be construed in favor of the beneficiaries, and the complete lack of evidence that ABA therapy may have harmful side effects—the Agency's decision to enforce its stringent regulatory standards to withhold ABA therapy coverage under the Basic Program, while exercising its statutorily-granted discretion to extend ABA therapy coverage under ECHO, seems highly suspect. The Court is left to speculate why the Agency chose to create this two-prong regulatory scheme in light of the Agency's failure to provide a reasoned explanation for it. This deficiency alone is sufficient to render the Agency's decision to extend ABA therapy coverage to the ECHO program, without also extending coverage to the Basic Program, arbitrary and capricious."

2012
Jul. 26

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Continued
2012
Jul. 26

“the Court will remand this case back to the Agency with instructions that ABA therapy coverage be provided to Basic Program beneficiaries who otherwise qualify for reimbursement and such reimbursement be provided in compliance with the applicable TRICARE guidelines for the expenses incurred by qualified beneficiaries to acquire ABA therapy for their children.”

TRICARE issues new [policy manual change](#) , cutting off previously covered military children without an autism diagnosis (such as Downs Syndrome or Cerebral palsy, with significant behavioral challenges) from ABA therapy, stating:

2012
Jul. 27

“TRICARE Management Activity (TMA) coverage decision memorandum of October 19, 2010. The “Medical Benefit Determinations-Applied Behavior Analysis for the Treatment of Autism Spectrum Disorders” determined that ABA is no longer considered special education for TRICARE program purposes and concludes that ABA is considered a part of an integrated set of services and supplies designed to assist in the reduction of the disabling effects of Autism Spectrum Disorder (ASD)”

These military families were given 14 days’ notice, no assistance in finding alternatives and their ABA therapy was terminated. It still isn’t clear how this 19 Oct memo’s findings translated to removing children without an ASD diagnosis from eligibility for ABA under ECHO?

2012
Aug. 10

TRICARE issues [new policy manual change](#) responding to the judge’s findings.

2012
Sept. 6

TRICARE Management Activity states military children without an ASD diagnosis
“Approval of Applied Behavioral Analysis for diagnoses other than Autism Spectrum Disorder (ASD) was in conflict with established fiscal law and TRICARE regulations.”
[Email traffic from Rep. Cathy McMorris-Rodgers.](#)

2012
Sept. 7

Regarding children without an ASD diagnosis, long-time advocate for military families, Lt Col Scott Campbell notes,
“individuals were eligible for ABA therapy under “Significant Physical Disabilities” at Section 2.3 by having problems with unaided performance of at least one of the following major life activities...” [Full email available here](#)

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2013 NDAA passed into law: Congress creates a one-year TRICARE ABA Pilot Program (Sec 705), noting in the conference report,

“The House bill contained a provision (sec. 704) that would authorize behavioral health treatment, including applied behavior analysis therapy, for autism spectrum disorders when prescribed by a physician to be covered under the basic TRICARE program for certain beneficiaries.

The Senate amendment contained a provision (sec. 705) that would authorize behavioral health treatment, including applied behavior analysis therapy, for all developmental disabilities as defined by section 15002(8) of title 42, United States Code, including autism spectrum disorders, when prescribed by a physician to be covered under the basic TRICARE program for certain beneficiaries.

**2013
Jan. 2**

The Senate recedes with an amendment that would require the Secretary of Defense to conduct a 1- year pilot program to provide for the treatment of autism spectrum disorders, including applied behavior analysis, for all TRICARE beneficiaries covered under the basic program.”

*Note: How the NDAA conference committee “compromise” occurred between the House and Senate version, both of which mandated coverage of ABA as medically necessary, has never been clear.

**2013
Feb. 7**

TRICARE [Policy Manual Sec 3.18](#), [Applied Behavioral Analysis](#) issued in response to 2013 NDAA

Judge Walton, in reconsideration, remands the case back to DoD and removes class certification,

“the Agency determined that ABA therapy could not be covered under the Basic Program regulations. This explanation is deficient for the reasons identified by the Court in its earlier opinion, which remain undisturbed. The Agency must therefore address the errors identified by the Court in its determination that ABA therapy is not a covered benefit under the Basic Program, but it need not address the “inconsistency” of providing coverage under ECHO while denying it under the Basic Program because no inconsistency, in fact, exists.

**2013
June 5**

Accordingly, the Court erred in ruling that the Agency’s “failure to provide a reasoned explanation” for providing coverage for ABA therapy under the ECHO Program while simultaneously denying it under the Basic Program was arbitrary and capricious.” ...and...

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Continued
2013
Jun. 5

“Accordingly, the Defendants’ Motion to Amend Judgment must be granted. The injunction previously issued by this Court is therefore vacated, the matter is remanded to the Agency for further action consistent with this Court’s prior opinion, and the reasoning of the Court’s prior opinion is amended as described in this opinion.”

Significant updates announced to the new [Pilot Program](#) , the [Autism Demonstration for Active Duty Families](#), and the [ABA Pilot for Non-Active Duty Families](#) , to go into effect on 25 July 2013. At this point in time, there are now 3 different programs covering ABA.

• **Related:**

- **2 July 2013:** Providers and families respond, [Navigation Behavior Consulting](#) by Megan Miller (ABA provider and military spouse)
- **16 July 2013:** Tricare's [New Autism Policy Raises Concerns](#)
- **16 July 2013:** [Where is the 'Care' in 'Tricare?'](#)
- **16 July 2013:** [Tricare Going AWOL on Military Autism Families?](#)
- **17 July 2013:** [Senator Warner Letter](#) to ASD Woodson
- **17 July 2013:** APBA Ltr to ASD Woodson
- **18 July 2013:** DHA Ltr to Contractors confirms impact to AD military children
- **19 July 2013:** BACB Response to Sec Woodson
- **19 July 2013:** Navigation Behavior Consulting response
- **20 July 2013:** Megan Miller responds on You Tube, providing a synopsis of changes and asks: “if they are willing to lie about this, what else are they lying about?”
- **24 July 2013:** TRICARE hosts a teleconference call with providers.
- **24 July 2013:** Megan Miller provides You Tube update.
- **5 Aug 2013:** ASD Woodson testifies to DoD Military Family Readiness Council after 80+ families submit letters regarding ABA. In his comments, he states (paraphrasing) that parents shouldn’t be reading the TRICARE policies but should wait until they go into effect.

2013
Jun. 25

[American Academy of Pediatrics \(AAP\)](#) publishes new recommendations for defining pediatric medical necessity, stating,

2013
Jul. 29

“Hence, the pediatric definition of medical necessity should be as follows: health care interventions that are evidence based, evidence informed, or based on consensus advisory opinion and that are recommended by recognized health care professionals, such as the AAP, to promote optimal growth and development in a child and to prevent, detect, diagnose, treat, ameliorate, or palliate the effects of physical, genetic, congenital, developmental, behavioral, or mental conditions, injuries, or disabilities.”

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In response to Sec 735 of the 2013 NDAA, the [TRICARE For Kids Coalition](#), led by [AAP](#), the [Children's Hospital Association](#), [NMFA](#), [MOAA](#), [Autism Speaks](#), the Military Special Needs Network and others provide significant [feedback](#) to DoD. From the AAP's input,

"AAP recommends that DoD also review TRICARE's definition and utilization of medical necessity to determine what services to finance. Many times insurers—both private and public—determine that a particular service does not meet their definition of medical necessity and will therefore deny coverage for that service and refuse to pay providers for the service."

2014
Mar. 27

TRICARE Announces all ABA will be provided under one demonstration project, consolidating all ABA programs under one uniform program [Federal Register Notice](#)

2014
Jun. 14

TRICARE [Operations Manual Chapter 18, Section 18](#)

2014
Sept. 19

5:48 pm: [Pentagon to cut autism healthcare payments in half](#)
7:15 pm: [Pentagon to delay autism spending cuts](#)

2014
Oct. 8

[Autism Roundtable held at Pentagon with Providers](#)

2014
Dec. 3

[Federal Register](#) notice of new provisions:

- Align ABA cost shares with other outpatient services under the TRICARE Basic Program.
- All cost shares under the program will accrue to the annual catastrophic cap.
- ABA reimbursement rates will be based on "Geographic Practice Cost Indices" and future changes will not exceed 15% each year.

2015
May 29

[Kennel Report](#) released discussing provider rates

2015
Nov. 25

[RAND Report](#) on ABA rates released

2016
Jan. 12

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2016
Jan. 19

[Service Delivery Experience and Intervention Needs of Military Families with Children with ASD](#) published

2016
Feb.

- 5 Feb. 2016: [Military spouses say needs for children with autism unmet](#)
- 12 Feb. 2016: [Military Spouses Caring for a Child with Autism: Exploring Risk and Protective Factors](#)
- 23 Feb. 2016: [TRICARE For Kids Coalition](#) and others provide feedback

2016
Mar.

- 8 Mar. 2016: [Senators Ltr to Sec Carter](#)
- 9 Mar. 2016: [House Autism Caucus Ltr to Sec Carter](#)
- 15 Mar. 2016: [Rep. Smith, Co-chair of the Autism Caucus, Calls on DoD to Reverse Cuts in Autism Reimbursements](#)

2016
Sept. 29

New changes to [Autism Care Demonstration](#)

2016
Nov. 30

[Military developmental pediatricians](#) push back against changes

2016
Dec. 21

[Survey of Military Parents of Children Diagnosed With Autism Spectrum Disorder](#) starts and is active today (Contractor Ipsos, DoD Report Control System #DD-HA(A) 2598):

“Designed to evaluate the usage of health care services and the effectiveness of the Autism Care Demonstration (ACD) by reaching out to the parents of children with autism spectrum disorder in the MHS.”

2016
Dec. 23

2017 NDAA directs no changes to rates for ABA providers

2017
Jan.

- 10 Jan. 2017: [MILITARY AUTISM FAMILIES FEAR LOSS OF SERVICES AMIDST NEW TRICARE POLICIES](#) blog post by Mandy Farmer
- 18 Jan. 2017: [Brief by Karen Driscoll](#) on new requirements

2017
Mar.

- 3 Mar. 2017: [ABA Roundtable](#)
- 10 Mar. 2017: DoD IG releases [report](#) detailing improper payments made to ABA providers.

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2017
May 5

DHA officially rescinded the [diagnostic and IQ testing requirements for the Autism Care Demonstration](#).

2017
Dec. 18

Defense Health Board issues [report](#) concerning pediatric healthcare, including a chapter on autism.

[In a House Armed Services Subcommittee on Military Personnel hearing](#), Rep. Gallego asks the following question to Lt Gen Place:

“I appreciate the Department’s submission of the annual and quarterly reports on the DOD Comprehensive Autism Care Demonstration (ACD). I understand that there are some questions about the metrics used in the 2018 ACD annual report to Congress and the two most recent 2019 quarterly reports and whether those metrics are being appropriately applied to determine the effectiveness of health outcomes under the ACD program. DOD seems to acknowledge the shortcomings of the Pervasive Developmental Disabilities Behavior Inventory (PDDBI) in the reports, yet it relies on that flawed data to draw conclusions about the effectiveness of the ACD in these recent reports to Congress. I also understand that some believe that the way in which the Department is applying the PDDBI is also inaccurate, particularly for purposes of determining effectiveness of the ACD.

2019
Dec. 5

Are there other measures of effectiveness that do not have the flaws that the Department acknowledges the PDDBI has that can be used for purposes of measuring the ACD? What are those other measures of autism treatment effectiveness? Might those measurements be used in future reports to Congress?” See link for Lt Gen Place’s response (page 111/115)

DHA announces significant changes to Autism Care Demonstration, to be implemented in May of 2021.

Related News Coverage:

- [DoD’s conclusions flawed about military children’s progress with autism therapy](#)
- [Critical Autism Services for Military Families in Jeopardy](#) Dr. Ira Cohen Podcast: *‘DHA is cooking the books’*
- [Changes Made to the Tricare Autism Care Demonstration](#)
- [ABA Therapy – A Military Mother’s Lifeline \(by Space Force spouse\)](#)
- [A devastating blow’: Military families struggle with insurance changes for people with autism](#)
- [Recent Tricare changes affect military children with autism](#)
- [‘A new low’: TRICARE cuts services for children with autism, concerning military families](#)

2021
Mar.

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Continued
2021
Mar.

- [Autism Speaks urges Department of Defense to expand, not restrict, services for military children](#)
- [Autism services for Texas military families could be cut under DoD](#)
- [A Defense Health Agency decision results in cuts to needed autism services for military families](#)
- [‘A disgrace’: Military families feel betrayed after insurance changes affect children with autism](#)

2021
Apr 9

[Letter to Lt Gen Place](#) from EFMP Coalition, head of DHA, on recently announced changes to Autism Card Demonstration (ACD) DHA, by [Exceptional Families Of The Military](#)

2021
May 19

Lt Gen Place response to 9 April [Letter](#)

2021
Jun. 24

[Letter to Lt Gen Place](#), response to 19 May Letter, by EFM

2021
Jul.

- **2 July 2021:** [Coalition Letter](#) to Lt Gen Place
- **8 July 2021:** [American Academy of Pediatrics Letter](#) to Lt Gen Place
- **9 July 2021:** [National Coalition for Access to Autism Services](#) Letter to HASC and SASC
- **13 July 2021:** [ABA Coding Coalition](#) Letter to Lt Gen Place

2021
Sept. 13

Meeting Notes with DHA, highlighted by, primary author of the PDDBI

“Dr. Cohen concluded that the DHA reports to Congress reflected a lack of understanding of the PDDBI, and that selective elimination of a large portion of cases led to biased data and data analyses”

2021
Oct.

- **1 Oct 2021:** [Letter from Rep. Posey](#) to Sec of Defense Austin
- **6 Oct 2021:** Meeting Notes with Humana, including meeting notes from 28 Sept DHA meeting

2021
Oct. 22

PAR, the company that publishes the Parenting Stress Index TRICARE is using, writes a [letter](#), stating:

“PAR objects to providing the data unless individuals who have access to such information are also licensed and trained in the use of psychological

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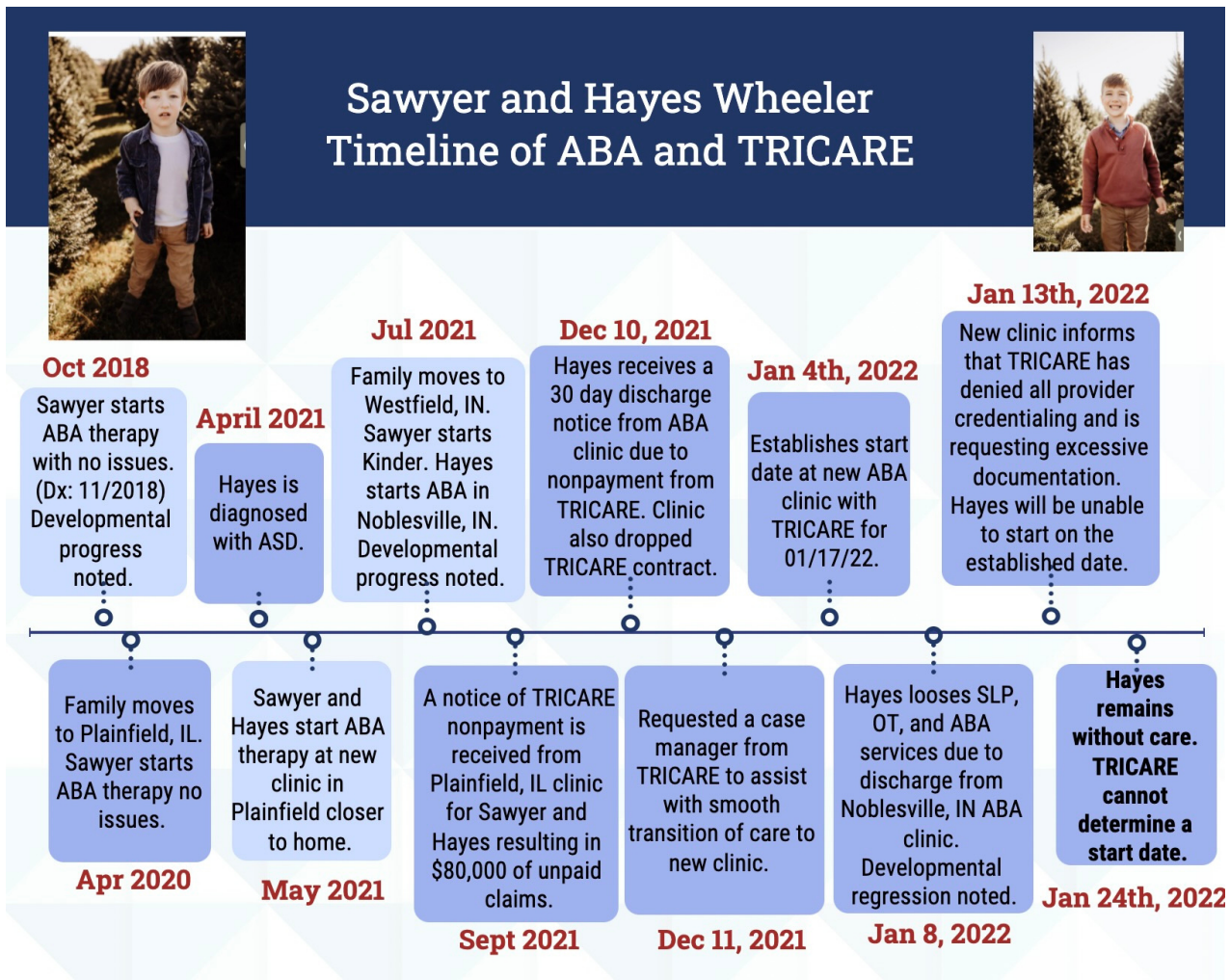
Continued
2021
Oct. 22

instruments. Such data and information, in the hands of untrained professionals, is not useful or relevant, and exposes PAR intellectual property to inappropriate disclosure.”

2021
Dec. 27

2022 NDAA is signed by President Biden, which includes [Sec 738](#), directing the Secretary of Defense to enter into an agreement with the National Academies of Science, Engineering and Math (NASEM), to conduct an independent assessment of DoD’s Autism Care Demonstration project.

- Exceptional Families of the Military published their 2021 [Autism Care Demonstration Survey](#)
- Exceptional Families of the Military published Sawyer and Hayes Wheeler Timeline of ABA and TRICARE



2022
Jan. 10

Timeline Note: All ABA providers were in network and accepted TRICARE health benefits. All care was authorized by Tricare.